

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 6227
Name: Arnold E. Kraft
Address: 434 Iris Rd Sw
City/State/Zip: Gridley, Kansas 66852
Purchaser: Crude Marketing Inc.
Operator Contact Person: Arnold E. Kraft
Phone: (620) 836-4570
Contractor: Name: Sky Drilling
License: 33557
Wellsite Geologist: John Haas

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____

<u>9/06/08</u>	<u>9/15/08</u>	<u>9/22/08</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 207-27430-0000
County: Woodson
NW SE NW SW Sec. 24 Twp. 23 S. R. 14 East West
1770 feet from (S) N (circle one) Line of Section
900 feet from E / (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW (SW)
Lease Name: Rich "A" Well #: 6
Field Name: Winterschied
Producing Formation: Mississippi

Elevation: Ground: 1000 Kelly Bushing: 1004
Total Depth: 1653 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 40 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 1650
feet depth to surface w/ 175 sx cmt.

Drilling Fluid Management Plan AII II NR
(Data must be collected from the Reserve Pit) 12-17-08
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Arnold E. Kraft
Title: Owner Date: 10/21/2008
Subscribed and sworn to before me this 22nd day of October
2008
Notary Public Gina M. Audiss
Date Commission Expires: 3-5-2010

NOTARY PUBLIC
GINA M. AUDISS
STATE OF KANSAS
My Appt. Expires 3-5-10

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION

OCT 27 2008

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Arnold E. Kraft Lease Name: Rich "A" Well #: 6
 Sec. 24 Twp. 23 S. R. 14 East West County: Woodson

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

Precision Well Logging

<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Name	Top	Datum
Kansas City		908
Squirrel	1260	1330
Cattleman	1398	1408
Bartlesville	1485	1535
Burgess	1590	1605
Mississippi	1615	

CASING RECORD <input type="checkbox"/> New <input checked="" type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	10	8		40	Portland	35	
Long	6 7/8	4 1/2		1650	Portland	175	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
1	9 shots (1616-1624) GL		

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 3/8	1616		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 09/22/2008		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	2		20		38

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____

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 OCT 27 2008
 CONSERVATION DIVISION
 WICHITA, KS



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 225532

Invoice Date: 09/10/2008 Terms:

Page 1

KRAFT, ARNOLD
434 IRIS ROAD SW
GRIDLEY KS 66852
() -

RICH A-6
19296
09-08-08

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	30.00	13.5000	405.00
1102	CALCIUM CHLORIDE (50#)	55.00	.7500	41.25
1118A	S-5 GEL/ BENTONITE (50#)	55.00	.1700	9.35

Description	Hours	Unit Price	Total
441 MIN. BULK DELIVERY	1.00	315.00	315.00
463 CEMENT PUMP (SURFACE)	1.00	725.00	725.00
463 EQUIPMENT MILEAGE (ONE WAY)	35.00	3.65	127.75

PJ.
9/21/08
ck # 16263

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CONSERVATION DIVISION
WICHITA, KS

Parts:	455.60	Freight:	.00	Tax:	28.71	AR	1652.06
Labor:	.00	Misc:	.00	Total:	1652.06		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____

Date _____

BARTLESVILLE, OK
918/338-0808

ELDORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

GILLETTE, WY
307/686-4914

McALESTER, OK
918/426-7667

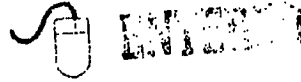
OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

WORLAND, WY
307/347-4577



CONSOLIDATED
Oil Well Services, LLC



TICKET NUMBER 19296
LOCATION EUREKA
FOREMAN Rick Ledford

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY												
9-8-08	4418	RICH A-6				Woodson												
CUSTOMER			<table border="1"> <tr> <td>TRUCK #</td> <td>DRIVER</td> <td>TRUCK #</td> <td>DRIVER</td> </tr> <tr> <td>463</td> <td>Shannon</td> <td></td> <td></td> </tr> <tr> <td>441</td> <td>David</td> <td></td> <td></td> </tr> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	463	Shannon			441	David		
TRUCK #	DRIVER	TRUCK #					DRIVER											
463	Shannon																	
441	David																	
MAILING ADDRESS																		
434 Iris Rd SW																		
CITY	STATE	ZIP CODE																
Gridley	KS																	

JOB TYPE Surface HOLE SIZE 11 3/4" HOLE DEPTH 41' CASING SIZE & WEIGHT 8 5/8"
 CASING DEPTH 40' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15" SLURRY VOL _____ WATER gal/sk 6.5 CEMENT LEFT in CASING 10'
 DISPLACEMENT 2 Bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting. Rig up to 8 5/8" casing. Break circulation w/ 5 Bbl fresh water. Mixed 30 sacks class "A" cement w/ 270 cackz + 27 gal @ 15" max. Displace w/ 2 Bbl fresh water. Shut casing in w/ good cement returns to surface. Job complete. Rig down.

Thank You

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405	1	PUMP CHARGE	725.00	725.00
5406	35	MILEAGE	3.65	127.75
11045	30 sacks	class "A" cement	13.50	405.00
1102	55"	270 cackz	.75	41.25
1118A	55"	270 gal	.17	9.35
5407		tax-mileage bulk tax	m/c	315.00
			Subtotal	11623.35
			SALES TAX	28.71
			ESTIMATED TOTAL	11652.06

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KANSAS CORPORATION CO.

OCT 27 2008

CONSERVATION DIVISION
KANSAS

Ravin 3737

22 5530

AUTHORIZATION called by Rig

TITLE _____

DATE _____



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 225696

Invoice Date: 09/17/2008 Terms:

Page 1

KRAFT, ARNOLD
434 IRIS ROAD SW
GRIDLEY KS 66852
() -

RICH A-6
19389
09-16-08

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	185.00	17.0000	3145.00
1110A	KOL SEAL (50# BAG)	925.00	.4200	388.50
1123	CITY WATER	3000.00	.0140	42.00
4453	4 1/2" LATCH DOWN PLUG	1.00	221.0000	221.00
4129	CENTRALIZER 4 1/2"	3.00	40.0000	120.00
4161	FLOAT SHOE 4 1/2" AFU	1.00	273.0000	273.00

Description	Hours	Unit Price	Total
437 80 BBL VACUUM TRUCK (CEMENT)	3.00	100.00	300.00
439 TON MILEAGE DELIVERY	356.30	1.20	427.56
463 CEMENT PUMP	1.00	925.00	925.00
463 EQUIPMENT MILEAGE (ONE WAY)	35.00	3.65	127.75

Handwritten:
PJ
9/24/08
CR#16269

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WICHITA, KS

Parts:	4189.50	Freight:	.00	Tax:	263.95	AR	6233.76
Labor:	.00	Misc:	.00	Total:	6233.76		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____

Date _____



CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 19389
LOCATION Edwards
FOREMAN Rick Ladd

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-16-08	4418	Rch A-6				Wichita
CUSTOMER			TRUCK #		DRIVER	
Arnoald Kraft			463		Shannon	
MAILING ADDRESS			439		Calin	
434 Iris Rd SW			437		Jim	
CITY			STATE		ZIP CODE	
Gridky			KS			

slurry
OALC
Rig 2

JOB TYPE loggings HOLE SIZE 6 7/8" HOLE DEPTH 1652' CASING SIZE & WEIGHT 4 1/2"
CASING DEPTH 1650' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 13 1/2" SLURRY VOL 55 bbl WATER gal/sk 8.0 CEMENT LEFT in CASING 0'
DISPLACEMENT 26 1/2 BW DISPLACEMENT PSI 700 PSI 1100 RATE _____

REMARKS: Safety meeting. Rig up to 4 1/2" casing. Break circulation w/ 10 bbl fresh water. Mixed 185 sacks thickset cement w/ 5" Kol-seal 00/1x @ 13 1/2" yield 1.69. Washout pump + lines shut down, release latch down plug. Displace w/ 26 1/2 bbl fresh water. Final pump pressure 700 PSI. Bump plug to 1000 PSI. wait 2 minutes, release pressure, float held. Good cement returns to surface. 12 bbl slurry to pit. Job complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	35	MILEAGE	3.65	127.75
1126A	185 sacks	thickset cement	17.00	3145.00
1119A	925 "	8" Kol-seal 00/1x	.92	852.50
5407A	10.18	ton-mileage bulk tax	1.20	427.56
5502C	3 hrs	80 BW VAC. TRK	100.00	300.00
1123	3000 gals	city water	14.00	42.00
4453	1	4 1/2" latch down plug	221.00	221.00
4129	3	4 1/2" connectors	40.00	120.00
4161	1	4 1/2" AFU float shoe	223.00	223.00
			Subtotal	5969.81
			SALES TAX	263.96
			ESTIMATED TOTAL	6233.77

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CONSERVATION DIVISION
WICHITA, KS

Revin 3737

205696

AUTHORIZATION Witnessed by Ben TITLE _____ DATE _____